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APPLICATION	NO.	FILING DATE		FIRST NAME	D INVEN	TOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
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nonprovisio	nal .	YES	\$700			\$300	\$1000		11/25/2005	
	EXAMINER		ART UNIT		CL	ASS-SUBCLASS	7			
	GANEY, STEVEN J		3752			236-100000				
CFR 1.363).  Change of control of the control of th	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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Joseph G. Swan

November 23, 2005 Date

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